



Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete If Known			
Application Number	09/818,052		
Filing Date	March 27, 2001		
First Named Inventor	Sue Reynolds		
Art Unit	2611		
Examiner Name	Lambrecht, Christopher M.		
Sheet	1	of	3
			Attorney Docket Number 559442001400

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Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner
Signature
va-95241

Christopher Lambrecht

Date
Considered

9/13/05



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Examiner Signature va-95241	<i>Christopher Lambrecht</i>	Date Considered 9/18/2005
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NON PATENT LITERATURE DOCUMENTS

Examiner Initials ¹	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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²Applicant's unique citation designation number (optional). ³Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature va-95241		Date Considered	9/16/05
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